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CONFIRMATION NO. 8256

<b>SERIAL NUMBER</b> 10/811,308	<b>FILING OR 371(c) DATE</b> 03/26/2004 <b>RULE</b>	<b>CLASS</b> 250	<b>GROUP ART UNIT</b> 2881	<b>ATTORNEY DOCKET NO.</b> KLA1P048C1
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 10/114,022 03/29/2002 PAT 6,746,566 which claims benefit of 60/339,487 12/11/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 NONE

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 06/08/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 4
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Verified and Acknowledged *[Signature]* *[Initials]*  
 Examiner's Signature Initials

**ADDRESS**  
 81736

**TITLE**  
 Transverse magnetic field voltage isolator

<b>FILING FEE RECEIVED</b> 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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